

AEMT-Intermediate

Practical Skills Examination Sheets



AEMT-Intermediate Practical Skills Examination Sheets “Updates”

Included on this page are the changes or updates that have been made to the Intermediate Practical Skills Examination Sheets. Any time the Bureau of EMS makes a change to the skills sheets we will update this page. The date at the bottom of each skills sheet will also be updated with the date of the most recent change.

Date of Change	Station #	Changes Made
6/14/02	ALL	All PSE testing sheets have been updated to meet the new AEMT-Intermediate curriculum. These sheets are to be used for all AEMT-Intermediate courses with a NYS Written certification exam date on or after August 15 th , 2002.
7/02/02	3-I	This station number was inadvertently left on the list of stations for the Intermediate exam. Station 3-I is not part of the Intermediate PSE and has been removed from the list of stations.

**New York State Department of Health
Bureau of Emergency Medical Services**

**EMT- Intermediate
Standardized Practical Skills Examination**

Skill Station 1:

Mandatory: 1A - Patient Assessment - Trauma

Optional Skill - Choose 1:

1B - Needle Decompression

1C - Helmet Removal

1D - Fracture Management – Long Bone

1E - Fracture Management – Joint Injury

Skill Station 2:

Mandatory: 2A - Patient Assessment - Medical

Optional Skill - Choose 1:

2B - Pulse Oximetry

2C – Supplemental Oxygen Administration

Skill Station 3:

Mandatory: 3A - Endotracheal Intubation - Adult

Mandatory: 3B - Endotracheal Intubation - Pediatric

Optional Skill - Choose 2:

3C - Dual Lumen Airway Device

3D - Mouth to Mask Ventilation

3E - Nasogastric Tube Placement

3F - Carbon Dioxide Detector

3G - Oral & Nasal Airway and Suctioning

3H - Flow Restricted Ventilator

Skill Station 4:

Mandatory: 4A - Venous Access

Skill Station 5:

Mandatory: 5A – Automated External Defibrillator

Skill Station 6:

Optional Skills - Choose 2:

- 6A - Spinal Immobilization - Seated
- 6B - Spinal Immobilization - Lying
- 6C - Bleeding Control & Shock Management
- 6D - Traction Splinting

Skill Station 7:

Optional Skill - Choose 1

- 7A - Immobilization in Infant/Child Safety Seat
- 7B - Extrication of a Child from Safety Seat
- 7C – Extrication of Infant from Safety Seat
- 7D - Neonatal Resuscitation
- 7E - Intraosseous Infusion

Candidates who fail **four skill stations or less** on the practical exam, may be retested on those skills. **Five or more failed stations** constitutes a failure of the practical examination and the candidate must complete a refresher course prior to being retested.



Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Scenario # _____ Time Start: _____ Time End: _____

Takes or verbalizes body substance isolation precautions	1	
SCENE SIZE-UP		
Determines the scene/situation is safe	1	
Determines the mechanism of injury/nature of illness	1	
Determines the number of patients	1	
Requests additional help if necessary	1	
Considers stabilization of spine	1	
INITIAL ASSESSMENT/RESUSCITATION		
Verbalizes general impression of the patient	1	
Determines responsiveness/level of consciousness	1	
Determines chief complaint/apparent life-threats	1	
Airway - Opens and assesses airway (1 point) - inserts adjunct as indicated (1 point)	2	
Breathing - Assess breathing (1 point) - Assures adequate ventilation (1 point) - Initiates appropriate oxygen therapy (1 point) - Manages any injury which may compromise breathing/ventilation (1 point)	4	
Circulation - Checks pulse (1 point) - Assess skin [either skin color, temperature, or condition (1 point) - assesses for and controls major bleeding if present (1 point) - Initiates shock management (1 point)	4	
Identifies priority patients/makes transport decision	1	
FOCUSED HISTORY AND PHYSICAL EXAMINATION/RAPID TRAUMA ASSESSMENT		
Selects appropriate assessment	1	
Obtains, or directs assistant to obtain, baseline vital signs	1	
Obtains SAMPLE history	1	
DETAILED PHYSICAL EXAMINATION NOTE: Areas denoted by ** may be integrated within Initial Assessment		
Head - Inspects mouth**, nose**, and assesses facial area (1 point) - Inspects and palpates scalp and ears (1 point) - Assesses eyes for PERRL** (1 point)	3	
Neck** - Checks position of trachea (1 point) - Checks jugular veins (1 point) - Palpates cervical spine (1 point)	3	
Chest** - Inspects chest (1 point) - Palpates chest (1 point) - Auscultates chest (1 point)	3	
Abdomen/pelvis** - Inspects and palpates abdomen (1 point) - Assesses pelvis (1 point) - Verbalizes assessment of genitalia/perineum as needed (1 point)	3	
Lower extremities** - inspects, palpates, and assesses motor, sensory, and distal circulatory functions (1 point/leg)	2	
Upper extremities - inspects, palpates, and assesses motor, sensory, and distal circulatory functions (1 point/arm)	2	
Posterior thorax, lumbar, and buttocks** - Inspects and palpates posterior thorax (1 point) - Inspects and palpates lumbar and buttocks area (1 point)	2	
Manages secondary injuries and wounds appropriately	1	
Performs ongoing assessment	1	
TOTAL TO PASS 30	43	

CRITICAL FAILURE

- _____ Failure to initiate or call for transport of the patient within 10 minutes time limit
- _____ Failure to take or verbalize infection control precautions
- _____ Failure to determine scene safety
- _____ Failure to assess for and provide spinal protection when indicated
- _____ Failure to voice and ultimately provide high concentration of oxygen
- _____ Failure to assess/provide adequate ventilation
- _____ Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- _____ Failure to differentiate patient's needing transportation versus continued on-scene assessment/treatment
- _____ Does other detailed physical examination before assessing & treating threats to airway, breathing & circulation
- _____ Orders a dangerous or inappropriate intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



**Advanced Level Practical Examination
Needle Chest Decompression**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

CRITERIA	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Assembles needed equipment (2" 14G needle/catheter, syringe, glove finger, betadine or alcohol prep, tape)	1	
Locates second intercostal space in the midclavicular line	1	
Prepares site with alcohol or betadine	1	
Attaches syringe to needle/catheter and withdraws plunger half way	1	
Holds needle perpendicular to skin and inserts needle to superior aspect of third rib	1	
Pushes needle in until pop is heard	1	
Advances catheter over needle	1	
Withdraws needle and syringe, leaving catheter in place	1	
Attaches glove finger on top of catheter as one way valve	1	
Tapes catheter into place	1	
Verbalizes assessment of patient response to procedure including general response and lung sounds	1	
Verbalizes documentation of procedure on PCR	1	
TOTAL	13	

Required to pass – 10 points

CRITICAL CRITERIA

- ___ Failure to properly locate second intercostal space
- ___ Failure to insert needle over SUPERIOR aspect of third rib
- ___ Failure to secure catheter in place
- ___ Failure to re-evaluate patient general response and lung sounds

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



**Advanced Level Practical Examination
Helmet Removal**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Kneels above patient's head and stabilizes head in neutral position by holding sides of helmet	1	
Instructs EMT assistant to assess motor, sensory, and circulatory function of each extremity	1	
Instructs EMT assistant to undo chin strap	1	
Instructs EMT assistant to take over stabilization by placing one hand under the neck and the other on the patient's jaw	1	
Releases hold on helmet sides and slowly removes helmet by pulling sides apart. When sides no longer are in contact with patient's face, withdraws helmet from patient's head	1	
Once the helmet is fully removed, again holds patient's head, and assists EMT helper to move head to neutral in-line position .	1	
Instructs EMT assistant to apply extrication collar	1	
Verbalizes maintenance of stabilization until patient is fully immobilized onto board.	1	
Reassesses motor, sensory, and circulatory function of each extremity	1	
TOTAL	10	

Required to pass – 7 points

CRITICAL CRITERIA;

- ___ Does not immediately direct, or take, manual stabilization of the head
- ___ Released, or ordered released, manual stabilization before it was maintained mechanically
- ___ Patient head moves excessively up, down, left, or right
- ___ Upon completion of procedure, head is not in a neutral position

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

IMMOBILIZATION SKILLS – LONG BONE

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to properly immobilize a closed, non-angulated long bone injury. You are required to treat only the specific, isolated injury to the extremity. The scene size-up and initial assessment have been completed and during the focused assessment a closed, non-angulated injury of the _____ (radius, ulna, tibia, fibula) was detected. Ongoing assessment of the patient's airway, breathing and central circulation is not necessary. You may use any equipment available in this room. You have 10 minutes to complete this skill station. Do you have any questions?

NOTES

Please print.

STATION

1 - D

IMMOBILIZATION
SKILLS
LONG BONE INJURY

Pass _____

Fail _____

Candidate _____

Examiner _____ Initials _____

Date _____ Start Time _____ Stop Time _____

	Points:	Possible	Awarded	Comments
Takes, or verbalizes, body substance isolation precautions		C		
Directs application of manual stabilization of the injury		1		
Assesses motor, sensory and circulatory function in the injured extremity		C		
Note: The examiner acknowledges "motor, sensory and circulatory function are present and normal"				
Measures the splint		1		
Applies the splint		1		
Immobilizes the joint above the injury site		C		
Immobilizes the joint below the injury site		C		
Secures the entire injured extremity		1		
Immobilizes the hand/foot in the position of function		1		
Reassesses motor, sensory and circulatory function in the injured extremity		C		
Note: The examiner acknowledges "motor, sensory and circulatory function are present and normal"				
Candidate did not grossly move the injured extremity		C		
Candidate must complete station within 10 minute time limit		C		

Note: Candidate must complete all critical criteria and receive at least 4 points to pass this station.

Total to pass 4

Total 5

COMMENTS:

IMMOBILIZATION SKILLS – JOINT INJURY

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to properly immobilize a non-complicated shoulder injury. You are required to treat only the specific, isolated injury to the shoulder. The scene size-up and initial assessment have been accomplished on the victim and during the focused assessment a shoulder injury was detected. Ongoing assessment of the patient's airway, breathing and central circulation is not necessary. You may use any equipment available in this room. You have 10 minutes to complete this skill station. Do you have any questions?

NOTES

Please print.

STATION

1 - E

IMMOBILIZATION
SKILLS
JOINT INJURY

Pass _____

Fail _____

Candidate _____

Examiner _____ Initials _____

Date _____ Start Time _____ Stop Time _____

	Points:	Possible	Awarded	Comments
Takes, or verbalizes, body substance isolation precautions	C			
Directs application of manual stabilization of the shoulder injury	1			
Assesses motor, sensory and circulatory function in the injured extremity	C			
Note: The examiner acknowledges "motor, sensory and circulatory function are present and normal"				
Selects the proper splinting material	1			
Immobilizes the site of the injury	1			
Immobilizes the bone above the injured joint	C			
Immobilizes the bone below the injured joint	C			
Reassesses motor, sensory and circulatory function in the injured extremity	C			
Note: The examiner acknowledges "motor, sensory and circulatory function are present and normal"				
Joint is supported so that the joint does not bear distal weight	C			
Candidate completed station within the 5 minute time limit	C			

Note: Candidate must complete all critical criteria and receive at least 2 points to pass this station.

Total to pass 2

Total 3

COMMENTS:



Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Scenario # _____ Time Start: _____ Time End: _____

Takes or verbalizes body substance isolation precautions	1	
SCENE SIZE-UP		
Determines the scene/situation is safe	1	
Determines the mechanism of injury/nature of illness	1	
Determines the number of patients	1	
Requests additional help if necessary	1	
Considers stabilization of spine	1	
INITIAL ASSESSMENT/RESUSCITATION		
Verbalizes general impression of the patient	1	
Determines responsiveness/level of consciousness	1	
Determines chief complaint/apparent life-threats	1	
Assesses airway and breathing - Assessment (1 point) - Assures adequate ventilation (1 point) - Initiates appropriate oxygen therapy (1 point)	3	
Assesses circulation - Assesses/controls major bleeding (1 point) - Assesses pulse (1 point) - Assesses skin [either skin color, temperature, or condition] (1 point)	3	
Identifies priority patients/makes transport decision	1	
FOCUSED HISTORY AND PHYSICAL EXAMINATION/RAPID TRAUMA ASSESSMENT		
History of present illness - Onset (1 point) - Severity (1 point) - Provocation (1 point) - Time (1 point) - Quality (1 point) - Radiation (1 point) - Clarifying questions of associated signs and symptoms as related to OPQRST (2 points)	8	
Past medical history - Allergies (1 point) - Past pertinent history (1 point) - Events leading to present illness (1 point) - Medications (1 point) - Last oral intake (1 point)	5	
Performs focused physical examination [assess affected body part/system if indicated, completes rapid assessment] - Cardiovascular - Neurological - Integumentary - Reproductive - Pulmonary - Musculoskeletal - GI/GU - Psychological/Social	5	
Vital signs - Pulse (1 point) - Respiratory rate and quality (1 point each) - Blood pressure (1 point) - AVPU (1 point)	5	
Diagnostics [must include application of ECG monitor for dyspnea and chest pain]	2	
States field impression of patient	1	
Verbalizes treatment plan for patient and calls for appropriate intervention(s)	1	
Transport decision re-evaluated	1	
ON-GOING ASSESSMENT		
Repeats initial assessment	1	
Repeats vital signs	1	
Evaluates response to treatment	1	
Reports focused assessment regarding patients complaint or injuries	1	

TOTAL TO PASS 32

46

CRITICAL FAILURE

- ___ Failure to initiate or call for transport of the patient within 15 minutes time limit
- ___ Failure to take or verbalize infection control precautions
- ___ Failure to determine scene safety before approaching patient
- ___ Failure to voice and ultimately provide appropriate oxygen therapy
- ___ Failure to assess/provide adequate ventilation
- ___ Failure to find or appropriately manage problems associated with airway, breathing, hemorrhage or shock
- ___ Failure to differentiate patient's need for immediate transportation versus continued assessment and treatment at the scene
- ___ Does other detailed or focused history or physical examination before treating threats to airway, breathing & circulation
- ___ Failure to determine the patient's primary problem
- ___ Orders a dangerous or inappropriate intervention
- ___ Failure to provide for spinal protection when indicated

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



**Advanced Level Practical Examination
Pulse Oximetry**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

	Points Possible	Points Awarded
Takes, or verbalizes body substance isolation precautions	1	
Places monitor near patient where display can readily be seen	1	
Attaches sensor probe to patient. Turns monitor on.	1	
Assures proper placement and adequate circulation by presence of light or display	1	
If location/circulation indicates inadequate, repositions sensor probe until proper sensing is confirmed	1	
Reports Spo2 reading	1	
TOTAL	6	

Required to pass – 5 points

CRITICAL CRITERIA:
None

SUPPLEMENTAL OXYGEN ADMINISTRATION

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to correctly assemble the equipment needed to administer supplemental oxygen in the prehospital setting. This is an isolated skills test. You will be required to assemble an oxygen tank and a regulator and administer oxygen to a patient using a non-rebreather mask. At this point, you will be instructed to discontinue oxygen administration by the non-rebreather mask and start oxygen administration using a nasal cannula because the patient cannot tolerate the mask. Once you have initiated oxygen administration using a nasal cannula, you will be instructed to discontinue oxygen administration completely. You may use only the equipment available in this room. You have five minutes to complete this station. Do you have any questions?

NOTES

Please print.

STATION
2 - C

SUPPLEMENTAL
OXYGEN
ADMINISTRATION

Pass _____
Fail _____

Candidate _____
Examiner _____ Initials _____
Date _____ Start Time _____ Stop Time _____

	Points:	Possible	Awarded	Comments
Takes, or verbalizes, body substance isolation precautions		C		
Assembles the regulator to the tank		1		
Opens the tank		1		
Checks for leaks		1		
Checks and verbalizes tank pressure		1		
Attaches non-rebreather mask to oxygen		1		
Prefills reservoir		C		
Adjusts liter flow to 12 liters per minute or greater		C		
Applies and adjusts the mask to the patient's face		1		
Note: The examiner must advise the candidate that the patient is not tolerating the non-rebreather mask. The medical director has ordered you to apply a nasal cannula to the patient.				
Attaches nasal cannula to oxygen		1		
Adjusts liter flow to 6 liters per minute or less		C		
Applies nasal cannula to the patient		1		
The examiner must advise the candidate to discontinue oxygen therapy				
Removes the nasal cannula from the patient		1		
Shuts off the regulator		1		
Relieves the pressure within the regulator		1		
Candidate assembles the tank and regulator without leaks		C		
Candidate completed the station within the 5 minute time limit		C		

Note: Candidate must complete all critical criteria and receive at least 8 points to pass this station.

Total to pass 8 Total 11

COMMENTS:



New York State Department of Health
Bureau of Emergency Medical Services

Advanced Level Practical Examination
VENTILATORY MANAGEMENT (ET)

Adapted from NREMT



STATION
3 - A

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

NOTE: If candidate elects to ventilate with BVM attached to reservoir and oxygen, full credit must be awarded for steps denoted by ** so long as first ventilation is delivered within initial 30 seconds.

Takes or verbalizes infection control precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct [either oropharyngeal or nasopharyngeal airway]	1	
NOTE: Examiner now informs candidate no gag reflex is present and patient accepts adjunct		
**Ventilates patient immediately with bag-valve-mask device unattached to oxygen	1	
**Hyperventilates patient with room air	1	
NOTE: Examiner now informs candidate that ventilation is being performed without difficulty and that pulse oximetry indicates the patient's blood oxygen saturation is 85%		
Attaches oxygen reservoir to bag-valve-mask device and connects to high flow oxygen regulator [12-15 liters/min.]	1	
Ventilates patient as a rate of 10-20/minute with appropriate volumes	1	
NOTE: After 30 seconds, examiner auscultates and reports breath sounds are present, equal bilaterally and medical control has ordered intubation. The examiner must now take over ventilation.		
Directs assistant to pre-oxygenate patient	1	
Identifies/selects proper equipment for intubation	1	
Checks equipment for: - Cuff leaks (1 point) - Laryngoscope operational and bulb tight (1 point)	2	
NOTE: Examiner to remove OPA and move out of the way when candidate is prepared to intubate		
Positions head properly	1	
Inserts blade while displacing tongue	1	
Elevates mandible with laryngoscope	1	
Introduces ET tube and advances to proper depth	1	
Inflates cuff to proper pressure and disconnects syringe	1	
Directs ventilation of patient	1	
Confirms proper placement by auscultation bilaterally and over epigastrium	1	
NOTE: Examiner to ask "If you had proper placement, what would you hear?"		
Secures ET tube [may be verbalize]	1	
NOTE: Examiner now asks candidate, "Please demonstrate one additional method of verifying proper tube placement in this patient."		
Identifies/selects proper equipment	1	
Verbalizes findings and interpretations (compares indicator color to the colorimetric scale and states reading to examiner)	1	
Note: Examiner now states, "You see secretions in the tube and hear gurgling sounds with the patient's exhalation."		
Identifies/selects a flexible suction catheter	1	
Pre-oxygenates patient	1	
Marks maximum insertion length with thumb and forefinger	1	
Inserts catheter into the ET tube leaving catheter port open	1	
At proper insertion depth, covers catheter port and applies suction while withdrawing catheter	1	
Ventilates/directs ventilation of patient as catheter is flushed with sterile water	1	
TOTAL TO PASS 19	27	

CRITICAL FAILURE

- ___ Failure to initiate ventilations within 30 seconds after applying gloves or interrupts ventilation for greater than 30 seconds at any time
- ___ Failure to take or verbalize body substance isolation precautions
- ___ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- ___ Failure to ventilate patient at rate of at least 10/min
- ___ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- ___ Failure to pre-oxygenate patient prior to intubation and suctioning
- ___ Failure to successfully intubate within 3 attempts
- ___ Failure to disconnect syringe **immediately** after inflating cuff of ET tube
- ___ Uses teeth as a fulcrum
- ___ Failure to assure proper tube placement by auscultation bilaterally **and** over the epigastrium
- ___ If used, stylette extends beyond end of ET tube
- ___ Inserts any adjunct in a manner dangerous to patient.
- ___ Suctions the patient for more than 15 seconds
- ___ Does not suction the patient

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Candidate: _____ Examiner: _____

Date: _____ Signature: _____

NOTE: If candidate elects to ventilate with BVM attached to reservoir and oxygen, full credit must be awarded for steps denoted by ** so long as first ventilation is delivered within initial 30 seconds.

Takes or verbalizes infection control precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct [either oropharyngeal or nasopharyngeal airway]	1	
NOTE: Examiner now informs candidate no gag reflex is present and patient accepts adjunct		
**Ventilated patient immediately with bag-valve-mask device unattached to oxygen	1	
**Hyperventilates patient with room air	1	
NOTE: Examiner now informs candidate that ventilation is being performed without difficulty and that pulse oximetry indicates the patient's blood oxygen saturation is 85%		
Attaches oxygen reservoir to bag-valve-mask device and connects to high flow oxygen regulator [12-15 liters/min.]	1	
Ventilates patient as a rate of 20-30/minute with appropriate volumes	1	
NOTE: After 30 seconds, examiner auscultates and reports breath sounds are present, equal bilaterally and medical control has ordered intubation. The examiner must now take over ventilation.		
Directs assistant to pre-oxygenate patient	1	
Identifies/selects proper equipment for intubation	1	
Checks laryngoscope to assure operational with bulb tight	1	
NOTE: Examiner to remove OPA and move out of the way when candidate is prepared to intubate		
Places patient in neutral or sniffing position	1	
Inserts blade while displacing tongue	1	
Elevates mandible with laryngoscope	1	
Introduces ET tube and advances to proper depth	1	
Directs ventilation of patient	1	
Confirms proper placement by auscultation bilaterally and over epigastrium	1	
NOTE: Examiner to ask "If you had proper placement, what would you hear?"		
Secures ET tube [may be verbalize]	1	
TOTAL TO PASS 12		17

CRITICAL FAILURE

- _____ Failure to initiate ventilations within 30 seconds after applying gloves or interrupts ventilation for greater than 30 seconds at any time
- _____ Failure to take or verbalize body substance isolation precautions
- _____ Failure to pad under the torso to allow neutral head position or sniffing position
- _____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- _____ Failure to ventilate patient at rate of at least 20/min
- _____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- _____ Failure to pre-oxygenate patient prior to intubation
- _____ Failure to successfully intubate within 3 attempts
- _____ Uses jms as a fulcrum
- _____ Failure to assure proper tube placement by auscultation bilaterally **and** over the epigastrium
- _____ Inserts any adjunct in a manner dangerous to patient.
- _____ Attempts to use any equipment not appropriate for the pediatric patient

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



New York State Department of Health
Bureau of Emergency Medical Services

Advanced Level Practical Examination
DUAL LUMEN AIRWAY DEVICE (COMBITUBE® OR PTL®)

Adapted from NREMT

NATIONAL REGISTRY
OF
EMERGENCY
MEDICAL
TECHNICIANS



STATION
3 - C

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

NOTE: If candidate elects to ventilate with BVM attached to reservoir and oxygen, full credit must be awarded for steps denoted by ** so long as first ventilation is delivered within initial 30 seconds.

Takes or verbalizes infection control precautions	1	
Opens the airway manually	1	
Elevates tongue, inserts simple adjunct [either oropharyngeal or nasopharyngeal airway]	1	
NOTE: Examiner now informs candidate no gag reflex is present and patient accepts adjunct		
**Ventilates patient immediately with bag-valve-mask device unattached to oxygen	1	
**Hyperventilates patient with room air	1	
NOTE: Examiner now informs candidate that ventilation is being performed without difficulty		
Attaches oxygen reservoir to bag-valve-mask device and connects to high flow oxygen regulator [12-15 liters/min.]	1	
Ventilates patient as a rate of 10-20/minute with appropriate volumes	1	
NOTE: After 30 seconds, examiner auscultates and reports breath sounds are present, equal bilaterally and medical control has ordered intubation. The examiner must now take over ventilation.		
Directs assistant to pre-oxygenate patient	1	
Checks/prepares airway device	1	
Lubricates distal tip of the device (may be verbalized)	1	
NOTE: Examiner to remove OPA and move out of the way when candidate is prepared to intubate		
Positions head properly	1	
Performs a tongue-jaw lift	1	
<input type="checkbox"/> USES COMBITUBE <input type="checkbox"/> USES PTL		
Inserts device in mid-line and to depth so printed ring is at level of teeth	Inserts device in mid-line until bite block flange is at level of teeth	1
Inflates pharyngeal cuff with proper volume and removes syringe	Secures strap	1
Inflates distal cuff with proper volume and removes syringe	Blows into tube #1 to adequately inflate both cuffs	1
Attaches/directs attachment of BVM to the first [esophageal placement] lumen and ventilates		1
Confirms placement and ventilation through correct lumen by observing chest rise, auscultation over the epigastrium and bilaterally over each lung		1
NOTE: Examiner states "You do not see rise and fall of the chest and you only hear sounds over the epigastrium."		
Attaches/directs attachment of BVM to the second [endotracheal placement] lumen and ventilates		1
Confirms placement and ventilation through correct lumen by observing chest rise, auscultation over the epigastrium and bilaterally over each lung		1
NOTE: Examiner confirms adequate chest rise, absent sounds over the epigastrium, and equal bilateral breath sounds.		
Secures device or confirms that the device remains properly secured		1
TOTAL TO PASS 14		20

CRITICAL FAILURE

- _____ Failure to initiate ventilations within 30 seconds after applying gloves or interrupts ventilation for greater than 30 seconds at any time
- _____ Failure to take or verbalize body substance isolation precautions
- _____ Failure to voice and ultimately provide high oxygen concentration [at least 85%]
- _____ Failure to ventilate patient at rate of at least 10/min
- _____ Failure to provide adequate volumes per breath [maximum 2 errors/minute permissible]
- _____ Failure to pre-oxygenate patient prior to insertion of the dual lumen airway device
- _____ Failure to insert the dual lumen airway device at a proper depth or at either proper place within 3 attempts
- _____ Failure to inflate both cuffs properly
- _____ **Combitube** - failure to remove the syringe immediately after inflation of each cuff
- _____ **PTL** - failure to secure the strap prior to cuff inflation
- _____ Failure to confirm that the proper lumen of the device is being ventilated by observing chest rise, auscultation over the epigastrium, and bilaterally over each lung
- _____ Inserts any adjunct in a manner dangerous to patient.

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

MOUTH-TO-MASK WITH SUPPLEMENTAL OXYGEN

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to ventilate a patient with supplemental oxygen using a mouth-to-mask technique. This is an isolated skills test. You may assume that mouth-to-barrier device ventilation is in progress and that the patient has a central pulse. The only patient management required is ventilator support using a mouth-to-mask technique with supplemental oxygen. You must ventilate the patient for at least 30 seconds. You will be evaluated on the appropriateness of ventilatory volumes. You may use any equipment available in this room. You have five minutes to complete this station. Do you have any questions?

NOTES

Please print.

STATION
3 - D

**MOUTH-TO-MASK
WITH SUPPLEMENTAL
OXYGEN**

Pass _____
Fail _____

Candidate _____
Examiner _____ Initials _____
Date _____ Start Time _____ Stop Time _____

	Points:	Possible	Awarded	Comments
Takes, or verbalizes, body substance isolation precautions		C		
Connects one-way valve to mask		1		
Opens patient's airway or confirms patient's airway is open (manually or with adjunct)		1		
Establishes and maintains a proper mask to face seal		1		
Ventilates the patient at the proper volume and rate (700-1000 ml per breath/10-20 breaths per minute)		1		
Candidate ventilated patient prior to connection of supplemental oxygen		C		
Connects the mask to high concentration of oxygen		1		
Adjusts flow rate to at least 15 liters per minute		C		
Continues ventilation of the patient at the proper volume and rate (400-600 ml per breath/10-20 breaths per minute)		1		
Note: the examiner must witness ventilations for at least 30 seconds				
Candidate provided proper volume per breath (Cannot accept more than 2 ventilations per minute below 400 ml)		C		
Candidate provided 10-20 breaths per minute		C		
Candidate allowed for complete exhalation		C		
Candidate completed the station within the 5 minute time limit		C		

Note: Candidate must complete all critical criteria and receive at least 4 points to pass this station.

Total to pass 4 Total 6

COMMENTS:



**Advanced Level Practical Examination
Nasogastric Tube Insertion**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

	Possible Points	Points Awarded
Takes/verbalizes body substance isolation precautions	1	
Explains procedure to patient	1	
Measures and marks the NG tube to proper length	1	
Positions patient in upright or semi-sitting position	1	
Lubricates distal 3-6" of NG tube	1	
Slightly flexes patient's head	1	
Inserts tube into widest nostril and advances straight back until tube is visible in oropharynx	1	
Instructs patient to repeatedly swallow or sip water while continuing to advance the tube	1	
Inserts tube until mark reaches outer edge of nostril	1	
Injects 20-35 ml of air into tube while auscultating epigastrium to confirm proper placement	1	
Secures tube	1	
Total Possible	11	
Needed to Pass	10	

Critical Criteria

- _____ Failure to take or verbalize body substance isolation precautions
- _____ Failure to explain procedure to patient before attempting to place the tube
- _____ Failure to measure and mark NG tube to proper length before insertion
- _____ Failure to verify proper placement by auscultation over epigastrium
- _____ Attempts to insert tube in a manner dangerous to the patient

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



**Advanced Level Practical Examination
End Tidal CO2 Detector**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

*Placement of End tidal CO2 detector on a previously intubated patient
EMT assistant ventilating intubated patient with BVM*

	Points Possible	Points Awarded
Takes, or verbalizes body substance isolation precautions	1	
Verbalizes examining CO2 detector for cracks, damage, and color or indicator against 'Check Color' scale	1	
Verbalizes confirmation of tube placement by visualization of chest rise and auscultation of breath sounds	1	
Removes cap ends from both ports and directs EMT assistant to stop ventilations and disconnect BVM from ET tube end	1	
Rapidly attaches detector to ET tube by placing larger plastic tube at bottom of detector to ET adapter.	1	
Directs EMT assistant to connect BVM to smaller tube at side of detector and restart ventilations	1	
After six or more breaths have been delivered with CO2 detector in place, verifies color of indicator fluctuates properly	1	
TOTAL	7	

Required to pass – 5 points

CRITICAL CRITERIA:

___ Interrupts ventilations for more than 3 seconds at any time

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

UPPER AIRWAY ADJUNCTS AND SUCTION

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to properly measure, insert and remove an oropharyngeal and nasopharyngeal airway as well as suction a patient's upper airway. This is an isolated skills test comprised of three separate skills. You may use any equipment available in this room. You have five minutes to complete this station. Do you have any questions?

NOTES

Please print.

STATION

3 - G

UPPER AIRWAY
ADJUNCTS
& SUCTION

Pass _____
Fail _____

Candidate _____
Examiner _____ Initials _____
Date _____ Start Time _____ Stop Time _____

Points: Possible Awarded Comments
OROPHARYNGEAL AIRWAY

Takes, or verbalizes, body substance isolation precautions	C		
Selects appropriately sized airway	1		
Measures airway	1		
Inserts airway without pushing the tongue posteriorly	1		
Note: The examiner must advise the candidate that the patient is gagging and becoming conscious			
Removes the oropharyngeal airway	1		

SUCTION

Note: The examiner must advise the candidate to suction the patient's airway			
Turns on/prepares suction device	1		
Assures presence of mechanical suction	1		
Inserts the suction tip without suction	1		
Applies suction to the oropharynx/nasopharynx	1		
Candidate demonstrated acceptable suction technique	C		

NASOPHARYNGEAL AIRWAY

Note: The examiner must advise the candidate to insert a nasopharyngeal airway			
Selects appropriately sized airway	1		
Measures airway	1		
Verbalizes lubrication of the nasal airway	1		
Fully inserts the airway with the bevel facing toward the septum	1		
Candidate did not insert any adjunct in a manner dangerous to the patient	C		
Candidate completed the station within the 5 minute time limit	C		

Note: Candidate must complete all critical criteria and receive at least 8 points to pass this station.

Total to pass 8 Total 12

COMMENTS:



**Advanced Level Practical Examination
Flow Restricted Oxygen Powered Ventilation**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

	Points Possible	Points Awarded
Assembles resuscitator to oxygen tank	1	
Takes, or verbalizes, body substance isolation precautions	1	
<i>Timing Starts Here</i>		
Selects appropriate size mask	1	
Turns on oxygen	1	
Manually opens patient's airway	1	
Verbalizes or inserts an airway adjunct	1	
Places resuscitator mask over patient's mouth and nose and assures a proper seal	1	
Presses ventilator trigger until patient's chest rises adequately	1	
Ventilates patient at a rate of ~ 12 per minute	1	
<i>Note: The examiner must witness for at least 30 seconds</i>		
TOTAL	9	

Required to pass – 6 points

- ___ Does not ensure adequate volume as evidenced by rise and fall of chest
- ___ Over-inflates the patient's lungs
- ___ Does not ventilate patient within 30 seconds (*see start time line*)
- ___ Does not ventilate patient at a rate of 10-20 breaths per minute
- ___ Does not allow adequate exhalation

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



New York State Department of Health
Bureau of Emergency Medical Services

STATION
4 - A

Advanced Level Practical Examination
INTRAVENOUS THERAPY

Adapted from NREMT



Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Time Start: _____ Time End: _____

Checks selected IV fluid for: - Proper fluid (1 point) - Clarity (1 point)	2	
Selects appropriate catheter	1	
Selects proper administration set	1	
Connects IV tubing to the IV bag	1	
Prepares administration set [fills drip chamber and flushes tubing]	1	
Cuts or tears tape [at any time before venipuncture]	1	
Takes/verbalizes infection control precautions [prior to venipuncture]	1	
Applies tourniquet	1	
Palpates suitable vein	1	
Cleanses site appropriately	1	
Performs venipuncture - Inserts stylette (1 point) - Notes or verbalizes flashback (1 point) - Occludes vein proximal to catheter (1 point) - Removes stylette (1 point) - Connects IV tubing to catheter (1 point)	5	
Releases tourniquet	1	
Runs IV for a brief period to assure patent line	1	
Secures catheter [tapes securely or verbalizes]	1	
Adjusts flow rate as appropriate	1	
Disposes/verbalizes disposal of needle in proper container	1	

TOTAL TO PASS 15

TOTAL 21

CRITICAL FAILURE

- ___ Exceeded the 6 minute time
- ___ Failure to take or verbalize infection control precautions prior to performing venipuncture
- ___ Contaminates equipment or site without appropriately correcting situation
- ___ Any improper technique resulting in the potential for catheter shear or air embolism
- ___ Failure to successfully establish IV within 3 attempts during 6 minute time limit
- ___ Failure to dispose/verbalize disposal of needle in proper container

NOTE: Check here (___) if candidate did not establish a patent IV and do not evaluate IV Bolus Medications.

CARDIAC ARREST MANAGEMENT

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to manage a prehospital cardiac arrest by integrating CPR skills, defibrillation, airway adjuncts and patient/scene management skills. There will be an AEMT assistant in this station. The AEMT assistant will only do as you instruct. As you arrive on the scene, you will encounter a patient in cardiac arrest. A first responder will be present performing single rescuer CPR. You must immediately establish control of the scene and begin resuscitation of the patient with an automated external defibrillator. At the appropriate time, the patient's airway must be controlled and you must ventilate or direct the ventilation of the patient using adjunctive equipment. You may use any of the supplies available in this room. You have 15 minutes to complete this skill station. Do you have any questions?

NOTES

Please print.

STATION
5 - A

**CARDIAC ARREST
MANAGEMENT
AED**

Pass _____
Fail _____

Candidate _____
Examiner _____ Initials _____
Date _____ Start Time _____ Stop Time _____

	Points:	Possible	Awarded	Comments
ASSESSMENT	Takes, or verbalizes, body substance isolation precautions	C		
	Briefly questions the rescuer about arrest events	1		
	Directs rescuer to stop CPR	1		
	Verifies absence of spontaneous pulse (skill station examiner states "no pulse")	C		
	Directs resumption of CPR	1		
	Turns on defibrillator power	1		
	Attaches automated defibrillator to the patient	1		
	Directs rescuer to stop CPR	1		
	Ensures all individuals are clear of the patient	1		
	Initiates analysis of the rhythm	1		
	Delivers shock (up to three successive shocks)	C		
	Verifies absence of spontaneous pulse (skill station examiner states "no pulse")	1		
	TRANSITION			
INTEGRATION	Directs resumption of CPR	1		
	Gathers additional information about arrest event	1		
	Verifies effectiveness of CPR (ventilation and compression)	1		
	Verbalizes insertion of a simple airway adjunct (oral/nasal airway)	1		
	Ventilates the patient	1		
	Assures high concentration of oxygen is delivered to the patient	1		
	CPR continues without unnecessary/prolonged interruption	1		
	Re-evaluates patient in approximately one minute	1		
	Candidate verbalizes defibrillation sequence protocol	1		
	TRANSPORTATION			
	Verbalizes transportation of patient	1		
	Candidate initiated first shock within 90 seconds of arrival	C		
	Assured all individuals were clear of patient before delivering each shock	C		
	Directed initiation/resumption of ventilation/compressions at appropriate times	C		
	Candidate completed station within the 15 minute time limit	C		

Note: Candidate must complete all critical criteria and receive at least 13 points to pass this station.

Total to pass 13 Total 19

COMMENTS:

SPINAL IMMOBILIZATION SKILLS SEATED PATIENT

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to provide spinal immobilization on a patient using a short spine immobilization device. You and an AEMT assistant arrive on the scene of an automobile crash. The scene is safe and there is only one patient. The assistant AEMT has completed the initial assessment and no critical condition requiring intervention was found. For the purpose of this station, the patient's vital signs remain stable. You are required to treat the specific, isolated problem of an unstable spine using a short spine immobilization device. You are responsible for the direction and subsequent actions of the AEMT assistant. Transferring and immobilizing the patient to the long backboard should be accomplished verbally. You have 10 minutes to complete this skill station. Do you have any questions?

NOTES

Please print.

STATION
6 - A

SPINAL
IMMOBILIZATION
SEATED PATIENT

Pass _____
Fail _____

Candidate _____
Examiner _____ Initials _____
Date _____ Start Time _____ Stop Time _____

	Points:	Possible	Awarded	Comments
Takes, or verbalizes, body substance isolation precautions	C			
Directs assistant to place and maintain head in the neutral in-line position	C			
Reassesses motor, sensory and circulatory function in each extremity	1			
Applies appropriately sized extrication collar	1			
Positions the immobilization device behind the patient	1			
Secures the device to the patient's torso	1			
Evaluates torso fixation and adjusts as necessary	1			
Evaluates and pads behind the patient's head as necessary	1			
Secures the patient's head to the device	1			
Verbalizes moving the patient to a long board	1			
Reassesses motor, sensory and circulatory function in each extremity	C			
Did not release or order release of manual immobilization before it was maintained mechanically	C			
Patient was not manipulated or moved excessively, to cause potential spinal compromise	C			
Did not move device excessively up, down, left, right on the patient's torso	C			
Head immobilization does not allow for excessive movement	C			
Torso fixation does not inhibit chest rise, resulting in respiratory compromise	C			
Upon completion of immobilization, head is in the neutral position	C			
Immobilized the torso before the head	C			
Candidate completed station within 10 minute time limit	C			

Note: Candidate must complete all critical criteria and receive at least 6 points to pass this station.

Total to pass 6 Total 8

COMMENTS:

SPINAL IMMOBILIZATION- SUPINE PATIENT

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to provide spinal immobilization on a patient using a long spine immobilization device. You arrive on the scene with an AEMT assistant. The assistant AEMT has completed the scene size-up as well as the initial assessment and no critical condition was found which would require intervention. For the purpose of this testing station, the patient's vital signs remain stable. You are required to treat the specific problem of an unstable spine using a long spine immobilization device. When moving the patient to the device, you should use the help of the assistant AEMT and the evaluator. The assistant AEMT should control the head and cervical spine of the patient while you and the evaluator move the patient to the immobilization device. You are responsible for the direction and subsequent action of the AEMT assistant. You may use any equipment available in this room. You have 10 minutes to complete this skill station. Do you have any questions?

NOTES

Please print.

STATION

6 - B

**SPINAL
IMMOBILIZATION
SUPINE PATIENT**

Pass _____

Fail _____

Candidate _____

Examiner _____ Initials _____

Date _____ Start Time _____ Stop Time _____

	Points:	Possible	Awarded	Comments
Takes, or verbalizes, body substance isolation precautions	C			
Directs assistant to place and maintain head in the neutral in-line position	C			
Reassesses motor, sensory and circulatory function in each extremity	1			
Applies appropriately sized extrication collar	1			
Positions the immobilization device appropriately	1			
Directs movement of the patient onto the device without compromising the integrity of the spine	C			
Applies padding to voids between the torso and the board as necessary	1			
Secures the patient's torso to the device	1			
Secures the patient's legs to the device	1			
Secures the patient's head to the device	1			
Secures the patient's arms	1			
Reassesses motor, sensory and circulatory function in each extremity	C			
Did not release or order release of manual immobilization before it was maintained mechanically	C			
Patient was not manipulated or moved excessively, to cause potential spinal compromise	C			
Did not move device excessively up, down, left, right on the patient's torso	C			
Head immobilization does not allow for excessive movement	C			
Upon completion of immobilization, head is in the neutral position	C			
Immobilized the torso before the head	C			
Candidate completed station within 10 minute time limit.	C			

Note: Candidate must complete all critical criteria and receive at least 6 points to pass this station.

Total to pass 6

Total 8

COMMENTS:



**Advanced Level Practical Examination
BLEEDING CONTROL/SHOCK MANAGEMENT**

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Time Start: _____ Time End: _____

Takes or verbalizes infection control precautions	1	
Applies direct pressure to the wound	1	
Elevates the extremity	1	
NOTE: The examiner must now inform the candidate that the wound continues to bleed		
Applies an additional dressing to the wound	1	
Note: The examiner must now inform the candidate that the wound is still continuing to bleed. The second dressing does not control bleeding.		
Locates and applies pressure to appropriate arterial pressure point	1	
Note: The examiner must now inform the candidate that the bleeding is controlled.		
Bandages the wound	1	
Note: The examiner must now inform the candidate that the patient is exhibiting signs and symptoms of hypoperfusion.		
Properly position the patient	1	
Administers high concentration oxygen	1	
Initiates steps to prevent heat loss from the patient	1	
Indicates the need for immediate transportation	1	
TOTAL TO PASS 7		
TOTAL 10		

CRITICAL FAILURE

- _____ Did not take or verbalize body substance isolation precautions
- _____ Did not apply high concentration of oxygen
- _____ Applies tourniquet before attempting other methods of hemorrhage control
- _____ Did not control hemorrhage in a timely manner
- _____ Did not indicate the need for immediate transportation

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.

IMMOBILIZATION SKILLS – TRACTION SPLINTING

INSTRUCTIONS TO THE CANDIDATE

This station is designed to test your ability to properly immobilize a mid-shaft femur injury with a traction splint. You will have an AEMT assistant to help you in the application of the device by applying manual traction when directed to do so. You are required to treat only the specific, isolated injury to the femur. The scene size-up and initial assessment have been accomplished on the victim and during the focused assessment a mid-shaft femur deformity was detected. Ongoing assessment of the patient's airway, breathing and central circulation is not necessary. You may use any equipment available in this room. You have 10 minutes to complete this skill station. Do you have any questions?

NOTES

Please print.



**IMMOBILIZATION
SKILLS
TRACTION SPLINTING**

Pass _____
Fail _____

Candidate _____
Examiner _____ Initials _____
Date _____ Start Time _____ Stop Time _____

	Points:	Possible	Awarded	Comments
Takes, or verbalizes, body substance isolation precautions		C		
Directs application of manual stabilization of the injured leg		1		
Candidate assesses motor, sensory and circulatory function in the injured extremity		C		
Note: The examiner acknowledges "motor, sensory and circulatory function are present and normal"				
Directs the application of manual traction		1		
Prepares/adjusts splint to the proper length		1		
Applies the splint to the injured leg		1		
Applies the proximal security device (e.g....ischial strap)		1		
Applies the distal securing device (e.g....ankle hitch)		1		
Applies mechanical traction		1		
Positions/secures the support straps		1		
Re-evaluates the proximal/distal security devices		1		
Candidate reassesses motor, sensory and circulatory function in the injured extremity		C		
Note: The examiner acknowledges "motor, sensory and circulatory function are present and normal"				
Note: The examiner must ask the candidate how he/she would prepare the patient for transportation				
Verbalizes securing the torso to the long board to immobilize the hip		1		
Verbalizes securing the splint to the long board to prevent movement of the splint		1		
Traction is maintained throughout application of splint		C		
The foot was not excessively rotated or extended after the splint was applied		C		
Secured the ischial strap before applying mechanical traction		C		
Final immobilization supported the femur and prevented rotation of the injured leg		C		
Applied mechanical traction before securing the leg to the splint		C		
Candidate completed the station within the 10 minute time limit		C		

Note: If the Sagar splint or the Kendricks Traction Device is used without elevating the patient's leg, application of manual traction is not necessary. The candidate should be awarded one point as if manual traction were applied.

Note: If the leg is elevated at all, manual traction must be applied before elevating the leg. The ankle hitch may be applied before elevating the leg and used to provide manual traction.

Note: Candidate must complete all critical criteria and receive at least 7 points to pass this station.

Total to pass 7 Total 11

COMMENTS:



Advanced Level Practical Examination
Immobilizing a Child or Infant in a Child/Infant Safety Seat

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

CRITERIA	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Directs assistant to take manual stabilization of the head	1	
Assesses distal sensory, motor, and circulatory function in each extremity	1	
Assesses any damage to child safety seat	1	
Places extrication collar or equivalent	1	
Immobilizes the child's torso snugly into the seat with towel rolls as needed on either side of the body	1	
Secures the cloth rolls and child with tape	1	
Immobilizes the child's head with towel rolls on each side of the head or one large towel in a horseshoe shape over the child's head extending to the shoulders	1	
Secures the towel/s with tape, starting at one side of the seat, crossing the forehead, and anchoring the tape on the other side of the seat.	1	
Reassesses distal sensory, motor, and circulatory function in each extremity	1	
Cuts or removes the seat belt that secures the child seat to the vehicle seat and removes safety seat from car	1	
TOTAL	11	

Required to pass – 8 points

- ☐ Did not immediately direct, or take, manual stabilization of the head
- ☐ Released, or ordered release of, manual stabilization before it was secured mechanically
- ☐ Failed to immobilize properly - allows for excessive movement
- ☐ Upon completion of immobilization, head is not in the neutral position
- ☐ Did not reassess motor, sensory, and circulatory function after immobilization to the device
- ☐ Immobilized head before securing the torso

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



**Advanced Level Practical Examination
Extrication of a Child from Child Safety Seat**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

CRITERIA	Possible Points	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Directs assistant to take manual stabilization of the head	1	
Apply an extrication collar or equivalent	1	
Assesses motor, sensory, and circulatory function of the extremities	1	
Release or cut the seat belt that secures the child safety seat to the car seat	1	
Remove the child safety seat from the car and set it on a firm surface (such as a spine board)	1	
Position the safety seat to overlap the bottom end of the spine board	1	
Tilt the safety seat so that the back of the seat rests on the spine board.	1	
Cut or release the shoulder and chest straps that secure the child to the seat	1	
Maintaining spinal stabilization, slide the child out of the seat and onto the extrication device	1	
Secure the child to the extrication device	1	
Reassesses motor, sensory, and circulatory function of the extremities	1	
TOTAL	12	

Required to pass – 9 points

CRITICAL CRITERIA:

- ___ Did not immediately direct, or take, manual stabilization of the head
- ___ Released, or ordered release of, manual stabilization before it was maintained mechanically
- ___ Patient manipulated, or moved excessively, causing potential spinal compromise
- ___ Failed to immobilize properly - allows for excessive movement
- ___ Upon completion of immobilization, head is not in neutral position
- ___ Does not reassess distal C/S/M function following completion of immobilization
- ___ Immobilized head to the board before securing the torso

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



**Advanced Level Practical Examination
Extrication of Infant from Infant Safety Seat**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

CRITERIA	Possible Points	Points Awarded
Takes or verbalizes body substance isolation precautions	1	
Directs assistant to take and maintain manual stabilization of the head	1	
Applies an extrication collar or equivalent	1	
Assesses circulatory, sensory and motor function of each extremity	1	
Releases or cuts the seat belt that secures the infant seat to the car seat	1	
Removes the infant seat from the car and sets it next to short spine board or equivalent (KED, etc.)	1	
Places padding on spine board for under infants upper back and shoulders	1	
Cuts or removes the shoulder or chest strap that secures the infant in the safety seat	1	
Slides arm board or equivalent thin board behind infant	1	
With assistant maintaining head stabilization while also holding board, removes infant on board from seat and places on spine board	1	
Secures the infant to the spine board or extrication device	1	
Reassesses motor, sensory, and circulatory function of each extremity	1	
TOTAL	12	

Required to pass – 9 points

CRITICAL CRITERIA:

- ___ Did not immediately take, or direct, manual stabilization of the head
- ___ Released, or ordered release of, manual stabilization before it was maintained mechanically
- ___ Did not pad behind infant's upper back and shoulders
- ___ Patient manipulated, or moved excessively, causing potential spinal compromise
- ___ Failed to immobilize properly - allows for excessive movement
- ___ Upon completion of immobilization, head is not in neutral position
- ___ Did not reassess motor, sensory, and circulatory function in each extremity after immobilization to the device
- ___ Immobilized head to the board before securing the torso

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



**Advanced Level Practical Examination (EMT-I)
Newborn Resuscitation**

Candidate: _____ **Examiner:** _____

Date: _____ **Signature:** _____

Scenario #: _____ **Time Start:** _____ **Time End:** _____

CRITERIA	Points Possible	Points Awarded
Takes, or verbalizes, body substance isolation precautions	1	
Verifies apnea and pulselessness (or slow heart/respiratory rate)	1	
Dries, warms, suctions, stimulates and positions infant to encourage spontaneous improvement	1	
Ventilate infant (using proper BVM being careful not to over inflate lungs)	1	
Verbalizes consideration of Endotracheal Intubation (does not intubate)	1	
Provides Chest Compressions for Heart Rate below 60bpm (appropriate hand placement, rate)	1	
Obtains Vascular Access Route (I.V / I.O.)	1	
Reassesses patient after each intervention	1	
TOTAL	8	

Required to pass – 7 points

Critical Failure Criteria

- _____ Failure to take Body Substance Isolation precautions
- _____ Failure to Dry, Warm, Suction, Stimulate and Position before using Adjuncts or Invasive Therapy
- _____ Failure to Reassess patient after each intervention

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.



Adapted from NREMT

NATIONAL REGISTRY
OF
EMERGENCY
MEDICAL
TECHNICIANS



New York State Department of Health Bureau of Emergency Medical Services

STATION
7 - E

Advanced Level Practical Examination PEDIATRIC INTRAOSSEOUS INFUSION

Candidate: _____ Examiner: _____

Date: _____ Signature: _____

Time Start: _____ Time End: _____

Checks selected IV fluid for: - Proper fluid (1 point) - Clarity (1 point)	2	
Selects appropriate equipment to include: - IO needle (1 point) - Syringe (1 point) - Saline (1 point) - Extension set (1 point)	4	
Selects proper administration set	1	
Connect administration set to bag	1	
Prepares administration set [fills drip chamber and flushes tubing]	1	
Prepares syringe and extension tubing	1	
Cuts or tears tape [at any time before IO puncture]	1	
Takes or verbalizes body substance isolation precautions [prior to IO puncture]	1	
Identifies proper anatomical site for IO puncture	1	
Cleanses site appropriately	1	
Performs IO puncture: - Stabilizes tibia (1 point) - Inserts needle at proper angle (1 point) - Advances needle with twisting motion until "pop" is felt (1 point) - Unscrews cap and removes stylette from needle (1 point)	4	
Disposes of needle in proper container	1	
Attaches syringe and extension set to IO needle and aspirates	1	
Slowly injects saline to assure proper placement of needle	1	
Connects administration set and adjusts flow rate as appropriate	1	
Secures needle with tape and supports with bulky dressing	1	

TOTAL TO PASS 16

TOTAL 23

CRITICAL FAILURE

- _____ Failure to establish a patent and properly adjusted IO line within the 6 minute time limit
- _____ Failure to take or verbalize infection control precautions prior to performing IO puncture
- _____ Contaminates equipment or site without appropriately correcting situation
- _____ Performs any improper technique resulting in the potential for air embolism
- _____ Failure to successfully establish IO infusion within 2 attempts during 6 minute time limit
- _____ Performing IO puncture in an unacceptable manner [improper site, incorrect needle angle, etc.]
- _____ Failure to dispose of needle in proper container
- _____ Orders or performs any dangerous or potentially harmful procedure

You must factually document your rationale for checking any of the above critical items on the reverse side of this form.